



State of Washington
Department of
Labor and Industries

PROVIDER BULLETIN

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THIS ISSUE

Reimbursement Policy for Post-Acute Brain Injury Rehabilitation Treatment Programs

TO:

Physicians
Osteopathic Physicians
Clinics
Brain Injury Programs
Self-Insured Employers
Hospital Administrators

Please route to:

Medical Records
Utilization Review
Discharge Planners
Patient Care Coordinators
Case Managers
Social Services
Nursing Administration
Occupational Therapists
Physical Therapists
Neuropsychology
Physiatry

FROM:

Evonne Peryea
Health Services Analysis
PO Box 44322
Olympia WA 98504-4322
(360) 902-6828

Provider Toll Free:

1-800-848-0811
902-6500 in Olympia

What is the purpose of this bulletin?

This bulletin describes the State Fund and Self-Insured Employers' billing requirements for outpatient post-acute brain injury rehabilitation treatment programs. The new policies and payment requirements apply to all facilities that qualify to provide post-acute brain injury rehabilitation treatment programs for injured workers.

This bulletin contains:

- ◆ Local Procedure Codes (Level III Codes)
- ◆ Description of Services
- ◆ Maximum Reimbursement Rates
- ◆ Payment Policies
- ◆ Documentation and Record Keeping Requirements

Authorization, admission criteria, and accreditation requirements have been described in Provider Bulletin #98-02.

The new Level III procedure codes, reimbursement rates, and payment policies become effective for dates of service on or after July 1, 1998.

How have billing procedures changed?

The old department local code 8903H for Head Injury Rehab Services will not be paid for dates of service after June 30, 1998. Any bills submitted with the old local procedure code (8903H) will be denied for services provided on or after July 1, 1998. Providers will need to resubmit their bills using the correct procedure code(s) in order to be paid.

Who may bill the new local codes for outpatient post-acute brain injury rehabilitation treatment programs?

Only programs that have been accredited by the Commission on Accreditation of Rehabilitation Facilities (**CARF**) can bill for post-acute brain injury rehabilitation treatment programs. See Provider Bulletin #98-02 for further details.

Where must a provider send proof of CARF accreditation to the department?

The department requires a provider rendering treatment on a State Fund claim must submit proof of their CARF accreditation to:

Department of Labor and Industries
Provider Accounts Unit
P.O. Box 44261
Olympia, WA. 98504-4261

Is a special provider number required in order to bill the department on a State Fund claim for services related to outpatient post-acute brain injury rehabilitation treatment programs?

Yes. Providers who have not already obtained a special provider number for their CARF accredited post-acute brain injury rehabilitation program must apply with the department for a provider number in order to bill the department for these services.

By contacting the department's Provider Accounts Unit at any of the numbers below, providers may request a provider application or determine if they already have a provider number to bill these services:

(360) 902-6542 **or** (360) 902-6543 **or** (360) 902-6545

Providers for State Fund claims only can not bill for these services using any other provider number. These services must be billed using a special post-acute brain injury rehabilitation program provider number assigned by the department.

What fee should a provider bill the department or self-insurer?

Providers must bill their **usual and customary** fee when treating injured workers. The department or self-insurer will pay the provider's usual and customary fee, or the fee schedule maximum, whichever amount is less. (Per WAC 296-20-010, section 2.)

A provider may **not** charge a worker the difference between the fee schedule maximum and their usual and customary charge. (Per WAC 296-20-010, section 6.)

What are the new local codes and their reimbursement rates for non- hospital based outpatient post-acute brain injury rehabilitation treatment programs?

New Local Code:	Service Description:	Fee Schedule Maximum Reimbursement:
8950H	Comprehensive Brain Injury Evaluation	\$2,800
8951H	Post-acute Brain Injury Rehabilitation Full-day Program—Minimum 6 hour per day.	\$500 per day
8952H	Post-acute Brain Injury Rehabilitation Half-day Program—Minimum 4 hour per day.	\$300 per day

What local department hospital outpatient revenue code(s) must be billed if a provider is a hospital based outpatient post-acute brain injury rehabilitation program?

Local Hospital Revenue Code:	Service Description:	Maximum Reimbursement:
014	Comprehensive Brain Injury Evaluation	\$2,800
015	Full-day Program—Minimum 6 hours per day.	\$500 per day
016	Half-day Program Minimum 4 hours per day.	\$300 per day

What services and tests are included in the Comprehensive Brain Injury Evaluation (8950H)?

A Comprehensive Brain Injury Evaluation must be performed for all injured workers who are being considered for admission into an outpatient post-acute brain injury rehabilitation treatment program. This type of evaluation is multidisciplinary and contains an in-depth analysis of the injured worker's mental, emotional, social, and physical status/functioning.

The following list of tests/services are included in the price of performing a Comprehensive Brain Injury Evaluation and may be performed in any combination as is indicated by the injured worker's condition: **(These services can not be billed separately.)**

- ♦ Neuropsychological Diagnostic Interview(s), testing, and scoring.
- ♦ Initial consultation and examination with the program's physician.
- ♦ Occupational and Physical Therapy evaluations.
- ♦ Vocational Rehabilitation evaluation.
- ♦ Speech/Language evaluation.
- ♦ Comprehensive Report.

The complementary and/or preparatory work that may be necessary to complete the Comprehensive Brain Injury Evaluation is considered part of the provider's administrative overhead. It includes, but is not limited to:

- ♦ Obtaining the injured worker's historical medical records & reviewing those records,
- ♦ Interviewing family members, if applicable,
- ♦ Phone contact and letters to other providers or community support services,
- ♦ Writing the final report, and
- ♦ Office supplies and materials required for service(s) delivery.

What services are included in Full-day (8951H) and Half-day (8952H) post-acute brain injury rehabilitation treatment programs?

The following therapies, treatments and/or services are included in the maximum fee schedule amount for the full-day or half-day brain injury rehabilitation treatment program and may **not** be billed separately.

- ♦ Physical Therapy and Occupational Therapy

- ◆ Speech/Language Therapy
- ◆ Psychotherapy
- ◆ Behavioral Modification and Counseling
- ◆ Nursing/Health Education and Pharmacology Management
- ◆ Group Therapy/Counseling
- ◆ Activities of Daily Living Management
- ◆ Recreational Therapy (including group outings)
- ◆ Vocational Counseling
- ◆ Follow-up interviews with injured worker or family, which may include home visits and/or phone contacts.

The ancillary work, materials, and preparation that may be necessary to carry out program functions and services that are considered part of the provider's administrative overhead and are **not** payable separately include, but are not limited to:

- ◆ Daily charting of patient progress and attendance,
- ◆ Report preparation,
- ◆ Case Management Services,
- ◆ Coordination of Care,
- ◆ Team Conferences/Interdisciplinary staffing, and
- ◆ Educational materials (e.g., work books & tapes).

What documentation is required of providers when billing the department for post-acute brain injury rehabilitation treatment programs?

- ◆ Providers are required to keep a daily record of patient attendance, activities, treatments, and progress.
- ◆ All test results and scoring must also be kept in the patient's medical record. Records should also include documentation of interviews with family and any coordination of care contacts (e.g., phone calls/letters) made with providers or case managers not directly associated with the facilities' program.
- ◆ Progress reports should be sent to the department regularly, including all pre-admission and discharge reports.